

FIRST NEWFOUNDLAND REGIMENT

P. 78

ATTESTATION OF

No. *3045* Name *William Cairnes* Corps

Questions to be put to the Recruit before Enlistment.

- 1. What is your name? 1. *William Cairnes*
- 2. What is your full Address? 2. *Great Falls, HB*
- 3. Are you a British Subject? 3. *Yes*
- 4. What is your age? 4. *19* Years *4* Months
- 5. What is your Trade or Calling? 5. *Merchant*
- 6. Are you Married? 6. *No*
- 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? } 7.
- 8. Are you willing to be vaccinated or re-vaccinated? 8. *Yes*
- 9. Are you willing to be enlisted for General Service? 9. *Yes*
- 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... } 10. { Name
Corps
- 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? 11. *Yes*

I, *William Cairnes*, do solemnly declare that the above answers made by me to the above questions are true and that I am willing to fulfil the engagements made.

6 August 28th/16 *William Cairnes* SIGNATURE OF RECRUIT.

..... *Charles Aye* Signature of Witness.

William Cairnes OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been ~~asked~~ *asked* as replied to, and the said recruit has made and signed the declaration and taken the oath before me at *St. John's* on this *28th* day of *August* 191*6*.

Signature of Attesting Officer *Charles Aye Capt*

†CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the.....

If enlisted by special authority, such will be attached to the original attestation.

Date 191..... } Approving Officer.
Place

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
† Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink as follows, (Name) re-enlisted in the (Regiment)

DESCRIPTIVE REPORT ON ENLISTMENT
 Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name William James
 Apparent age 19 years 4 months. Height 5 feet 9 inches
 Chest Measurement { Girth when fully expanded 39 inches
 Range of expansion 6 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin William James, Head Jarvis, H.B.
 Relationship Father

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

Particulars as to Children

Christian Names _____ Date and Place of Birth _____

STATEMENT OF THE SERVICES

Corps in which served	Regt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon forwards of Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>28 8 16</u>									
Joined at <u>St. John's</u> on <u>August 28th 16</u>									
<u>Embarked St. John's N.S. bound to Westward 31st 17</u>									<u>See notes for 156th 11-17</u>
<u>Disembarked Lower 12-6-17 and Batten on the field 2-7-17</u>									
<u>Killed in action 28-9-17</u>									
<u>Report Langermann to 1741 Corps W.U. 25.8.20</u>									
Total Service forfeited as above _____									
Total Service towards Engagement to <u>28-9-17</u> [date of discharge] _____ years <u>32</u> days									
Pension _____									

C.R.

3045

Wm. Caines was attested for General Service

with the NEWFOUNDLAND REGIMENT on .. August .. 28th .. 1916.

Regimental No. 3045 was allotted to Pte Wm. Caines

AUTHORITY:

Record Officer

Dept. of Militia,

March 25th, 1919.

C.R. 3040

Detachment of Terminal Hall of Officers and men attached St. John's

SI-7-17 Sailed Halifax S. S. AUSTONIA 18-4-17.

#3045 PTE. W. CAINES.

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

Surname James

OR
Christian Name Wm

Table I.—GENERAL TABLE.

Birthplace:—Parish _____ County _____

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on <u>28</u> day of <u>Aug</u> 191 <u>1</u> at <u>St. Joana</u>		day of	191
Declared Age	<u>19</u> years <u>4 mos</u> days		years	days
Trade or Occupation	<u>Fisherman</u>			
Height	<u>5</u> feet <u>10</u> inches		feet	inches
Weight	<u>124</u> lbs.			lbs.
Chest Measurement	Grith when fully expanded ... <u>39</u> inches			inches
	Range of Expansion ... <u>4</u> inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V	<u>6/6</u>	R.E.—V	
	L.E.—V	<u>6/6</u>	L.E.—V	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to Cause rejection	(b)		(b)	
Approved by (Signature)	<u>Samuel Paton</u>			
(Rank)	<u>Major</u>			
Enlisted	at <u>St. Joana</u> <u>1911</u>			
	on <u>28</u> day of <u>Aug</u> 191 <u>1</u>	on	day of	191
Joined on Enlistment	Corps. <u>3/12/11</u>	Regtl. No. <u>3045</u>	Corps.	Regtl. No.
Transferred to				
Became non-effective by				
(Signature)	on	day of	191	on
(Rank)				

Table III.—Boards: Courts of Inquiry, Vaccination, Inoculation, and Examination for Foreign Service, Extension, Re-engagement, or Prolongation of service; and of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief Details, and Signature
23-11-16	vaccination 40
9-11-16	} <u>TAB</u> 40
15-11-16	
20-11-16	
	} 3. 40

TABLE IV.—SERVICE TABLE.

Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation	Station or Troopship	Date of Arrival or Embarkation	Date of Departure or Disembarkation
S.S. Florida	Jan 31	Feb 3 1917			
Windsor	Feb 3	16.4.17			
S.S. Ausonia	16.4.17				

to

NEWFOUNDLAND CONTINGENT

Regiment or corps *Newfoundland*
 No. *3045* Rank *Private* Name *Caines W.*
 Died (a) *Interstate* at *France* on the *28* of *September* 191*7*
 Deserted at _____ on the _____ of _____ 191*7*

I Certify to the correctness of above in every particular.

{ Commanding Squadron, Troop, Battery or Company.

STATEMENT OF ACCOUNT.

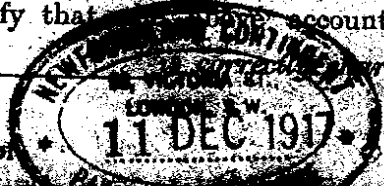
Form 1.

Date	Dr.	£ s. d.			Cr.	£ s. d.			
		£	s.	d.		£	s.	d.	
	Balance Dr. last month				Balance Cr. last month	9	16	5	
	Cash issues (Date of each issue to be stated)				Pay days at _____ from _____ to _____				
		£	s.	d.	Proficiency, Service or good conduct pay days at _____ from _____ to _____				
	191				Messing allowance days at _____ from _____ to _____				
	"				Kit allowance				
	"				Amount produced by the sale of Effects from Form 2				
	"				Amount of Savings Bank balance including				
	Consolidated stoppage				This account is in accordance with information received at the Pay & Record Office to 11/12/17 and is therefore subject to amendment if, and as may be found necessary.				
	Balance due by the Paymaster	9	16	5	Balance due to the Paymaster				
		£	9	16	5	£	9	16	5

CW
17/12/17

I hereby Certify that the above account is correct in every particular, and that the debtor balance of £ _____ is chargeable by the _____

Dated at this day of _____ 191*7*



CHIEF PAYMASTER & OFFICER IN CHARGE

(a) Here state whether the deceased has left a Will. In the latter case the Will should be annexed to this statement. (b) Where the balance is in favour of the contingent, the balance should be stated in full.

FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources.

ORIGINAL

REGIMENT OR CORPS Newfoundland Squadron, Troop, Battery or Company B. Coy.
Regimental No. 3045 Rank Private

Surname CAINES. Christian Names William

Died { Date 28/9/17 Place France or Belgium
Cause of Death* Killed in Action.

Nature and Date of Report B 213 1/10/17. COPY SENT TO O.C. H.Q. ST. JOHNS. N.F.L.D.
By whom made O.C. Battalion.



* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

State whether he leaves a Will or not { (a) in Pay Book (Army Book 64) Not received (b) in Small Book (if at Base) Not received
(c) as a separate document Not received
21 DEC 1917

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force, or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Station and Date } 3/10/17. Signature of Officer in charge of Section } [Signature]
Adjutant-General's Office at the Base }

MAJOR
1/c No 1 Reg Infantry Section
G.H.Q. 3rd Echelon

C.R. 4452

3045 Pte.W.Caines.

Ext.of Daily Orders part 2 From G.H.Q.

3rd.Echelon,6/10/17.

Killed in Action 28/9/17.

For information see file Daily Orders,Nfld Regt.

letter No.4357.

NORFOLK ISLAND POSTAL TELEGRAPHS

Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address _____

Line Number	Rcd	By	Sent	by	Check
-------------	-----	----	------	----	-------

Dated October 9, 1917.

To Mr. William Caines,
Great Jervois, F.B.

Regret to inform you Record Office, London, today reports No. 3045, Private William Caines, was killed in action September twentyeighth.

R.A. SQUIRES
Colonial Secretary.

NOTE FOR OPERATOR

This message is not to be sent until receiving office notifies that message to Reacher at Great Jervois has been delivered and acted upon.

FOR TYPEWRITER

CR 3041
April 2nd, 18.

Mr. William Gaines,
Great Jarvis, F.B.

Sir:-

The following description of Grave Site,
has been received from the Pay & Record Office,
London, of:-

"#3045 Pte. W. Gaines. (Report
"Langemarck. 174.1.) Place of
"Grave Just N.W. of Langemarck.
"Reported by Gravee Registration
"Units."

(I have the honour to be,

Sir,

Your obedient servant,

W. G. Readell
Major Chief Staff Officer.

11+0

539404 3345

To ensure that as far as may be possible none of the next of kin of those who have fallen in the War shall fail to receive the Memorial Plaque, it is requested that on receipt of the enclosed Plaque this card be signed at the bottom and posted. No stamp is required.

E



James O'Rourke

2 1/2 AT 6599 10/19 900M (20) D.St.

Army Form B. 103.

Regimental Number **CR 3045**

Casualty Form - Active Service.

Regiment or Corps **Newfoundland**

Rank **Act. Capt** Surname **Caines** Christian Name **William**

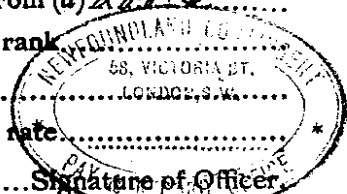
Religion **Ch. of E.** Age on Enlistment **28** years **11** months

Enlisted (a) **28.8.16** Terms of Service (a) **Duration** Service reckons from (a) **28.8.16**

Date of promotion to present rank **28.8.16** Date of appointment to lance rank **28.8.16**

Extended **Reservist** Re-engaged **28.8.16** Qualification (b) **Act. Capt** Corps Trade and rate **Act. Capt**

Occupation **Reservist** Signature of Officer **[Signature]**



Report		Record of promotions, reductions, transfers, specialties, &c., during active service, as reported on Army Form E 218, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 218, Army Form A. 36, or other official documents.
Date	From whom received				
			Embarked St. John's	11.6.17	
			Disembarked Queen	12.6.17	
			Joined Battalion	2.7.17	Ba 12

UNIFIED TRUE COPY

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered. (b) Signaller, Shoeing-Smith, Am. W. 2527-12888 10000 7/17 (25288) C. P. & S., Ltd. Form B. 103 5/11/36. I.P.T.O.

Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121

Number Sheet 100
Signature of O. C. Company [Signature]

Regiment of 1st New South Wales

Forms
B. 121
300

Regimental Number and Name <u>3045 Cairns W.</u>	Enlistment Age on <u>19</u> years <u>4</u> months Place and Date of Enlistment <u>St. John's</u> <u>25.8.16</u>	Trade <u>Helaman</u> Religion <u>C. of E.</u> Place of Birth _____	Good Conduct Badges, Service pay or proficiency pay _____	By whom awarded _____	REMARKS _____
Period of { with Colours <u>3 1/2</u> years with Reserve _____ years	OFFENCE _____	Names of Witnesses _____	Punishment awarded _____	Basis of award or of order dispensing with trial _____	_____

Killed in Action 28.9.17

TO BE CONTINUED OVER